

**State of California  
Office of Administrative Law**

In re:

Bureau of Automotive Repair

Regulatory Action:

Title 16, California Code of Regulations

Adopt sections:

Amend sections: 3340.29

Repeal sections:

NOTICE OF APPROVAL OF CHANGES  
WITHOUT REGULATORY EFFECT

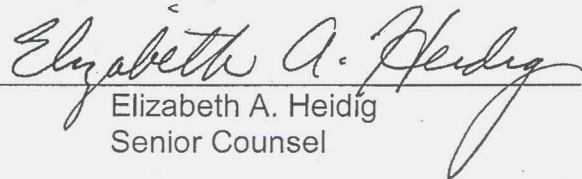
California Code of Regulations, Title 1,  
Section 100

OAL File No. 2013-0114-01 N

The Bureau of Automotive Repair is amending its existing Application for Initial Smog Check Inspector and/or Smog Check Repair Technician License, which is incorporated by reference into section 3340.29 of title 16. This amendment will clarify one's legal right to substitute comparable military training for other prescribed Smog Check training requirements as articulated in Health & Safety Code section 44031.5. It will also now reflect recent requirements mandated by Business & Professions Code section 494.5.

OAL approves this change without regulatory effect as meeting the requirements of California Code of Regulations, Title 1, section 100.

Date: 2/27/2013

  
Elizabeth A. Heidig  
Senior Counsel

For: DEBRA M. CORNEZ  
Director

Original: John Wallauch  
Copy: Vince Somma

NONSUBSTANTIVE

NOTICE PUBLICATION/REGULATION SUBMISSION

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER <b>Z-</b>	REGULATORY ACTION NUMBER <b>2013-0114-01N</b>	EMERGENCY NUMBER
For use by Office of Administrative Law (OAL) only			
NOTICE		REGULATIONS	

ENDORSED FILED  
IN THE OFFICE OF

2013 FEB 27 PM 1:52

*Debra Bowen*  
DEBRA BOWEN  
SECRETARY OF STATE

AGENCY WITH RULEMAKING AUTHORITY  
Bureau of Automotive Repair / Department of Consumer Affairs

AGENCY FILE NUMBER (if any)  
2012\_231

**A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)**

1. SUBJECT OF NOTICE		TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other		4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ONLY	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn		NOTICE REGISTER NUMBER	PUBLICATION DATE

**B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)**

1a. SUBJECT OF REGULATION(S) SMOG CHECK INSPECTORS AND REPAIR TECHNICIANS APPLICATION		1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)	
2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)			
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)		ADOPT	
		AMEND	
TITLE(S) 16		3340.29	
		REPEAL	
3. TYPE OF FILING			
<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)			
<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.			
<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))			
<input checked="" type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)			
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)			
<input type="checkbox"/> File & Print			
<input type="checkbox"/> Print Only			
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))			
<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)			
<input type="checkbox"/> Other (Specify) _____			
4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)			
5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)			
<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))			
<input type="checkbox"/> Effective on filing with Secretary of State			
<input checked="" type="checkbox"/> \$100 Changes Without Regulatory Effect			
<input type="checkbox"/> Effective other (Specify) _____			
6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY			
<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)			
<input type="checkbox"/> Fair Political Practices Commission			
<input type="checkbox"/> State Fire Marshal			
<input type="checkbox"/> Other (Specify) _____			
7. CONTACT PERSON Vincent Somma		TELEPHONE NUMBER 916.403.0159	FAX NUMBER (Optional) 916.464.3425
		E-MAIL ADDRESS (Optional) vincent.somma@dca.ca.gov	

8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE  
*Denise Brown*  
TYPED NAME AND TITLE OF SIGNATORY  
DENISE BROWN, Director, Department of Consumer Affairs

DATE  
1-14-13

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ENDORSED APPROVED

FEB 27 2013

Office of Administrative Law